

New Jersey Public Employment Relations Commission
POLICE AND FIRE
COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line #

SECTION I: Parties and Term of Contracts

1	Public Employer:	<u>Delanco Township</u>	County:	<u>Burlington</u>
2	Employee Organization:	<u>Delanco Police Assn</u>	Number of Employees in Unit:	<u>10 - 11</u>
3	Base Year Contract Term:	<u>Jan. 1, 2014 - Dec. 31, 2015</u>		
4	New Contract Term:	<u>Jan. 1, 2016 - June 30, 2019</u>		

SECTION II: Type of Contract Settlement (please check only one)

5	<input checked="checked" type="checkbox"/>	Contract settled without neutral assistance		
6	<input type="checkbox"/>	Contract settled with assistance of mediator		
7	<input type="checkbox"/>	Contract settled with assistance of fact-finder		
8	<input type="checkbox"/>	Contract settled in Interest Arbitration		
9	If contract was settled in Interest Arbitration, did the Arbitrator issue an Award?			
	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

SECTION III: Base Salary Calculation

The "base year" refers to the final year of the expiring or expired agreement.

N.J.S.A. 34:13A-16.7(a) defines base salary as follows: "'Base salary' means the salary provided pursuant to a salary guide or table and any amount provided pursuant to a salary increment, including any amount for longevity or length of service. It shall also include any other item agreed to by the parties, or any other item that was included in the base salary as understood by the parties in the prior contract. Base salary shall not include non-salary economic issues, pension and health and medical insurance costs."

10	Salary Costs in base year	\$	<u>758,017</u>
11	Longevity Costs in base year	\$	<u>13,013</u>
12	Other base year salary costs		
	<u>Holiday pay</u>	\$	<u>39,320</u>
	<u>College pay</u>	\$	<u>5,650</u>
	<u>Shift differential</u>	\$	<u>7,657</u>
	<u></u>	\$	<u></u>
	Sum of "Other" Costs Listed in Line 12.	\$	<u>52,627</u>
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	\$	<u>823,657</u>

SECTION IV: Increase in Base Salary Cost (for each year of New CNA)

14 Total Base Salary Cost from Line 13: \$ 823,657

	Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	<u>1/1/16</u>	<u>7/1/17</u>	<u>7/1/18</u>	<u></u>	<u></u>	<u></u>
16	Cost of Salary Increments (\$)	<u>5,787</u>	<u>40,391</u>	<u>42,299</u>	<u></u>	<u></u>	<u></u>
17	Salary Increase Above Increments (\$)	<u>11,979</u>	<u>-35,493</u>	<u>81,026</u>	<u></u>	<u></u>	<u></u>
18	Longevity Increase (\$)	<u>-925</u>	<u>-2,768</u>	<u>187</u>	<u></u>	<u></u>	<u></u>
19	Total Increased Cost for "Other" Items (\$)	<u>695</u>	<u>1,718</u>	<u>1,860</u>	<u></u>	<u></u>	<u></u>
20	Total Increase (\$) (sum of lines 16-19)	<u>17,536</u>	<u>3,848</u>	<u>125,372</u>	<u></u>	<u></u>	<u></u>

SECTION V: Average Increase Over Term of New CNA

21 Dollar Increase Over Life of Contract \$ 146,756 [Take sum of all amounts listed on Line 20 above]

22 Percentage Increase Over Life of Contract 17.8 % [Divide amount on Line 21 by amount on Line 14]

23 Average Percentage Increase Per Year 5.1 % [Divide percentage on Line 22 by number of years of the contract]

Employer: Delanco TownshipEmployee Organization: Delanco Police Assn.

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SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases→

24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	Life Insurance	248	12	14	53			
	Cell phone allowance	0	2,470	1,820	390			
	Field Training Officer	0	375	375	0			
	EMT pay	925	500	0	0			
	Uniform allowance	9,900	1,100	1,100	0			
25	Totals (\$):	11,073	4,457	3,309	443			

SECTION VII: Medical Costs**Insurance Costs**

	Base Year	Year 1
26 Health Plan Cost	\$ 152,496	\$ 185,028
27 Prescription Plan Cost	\$ 40,848	\$ 47,940
28 Dental Plan Cost	\$ 7,044	\$ 7,284
29 Vision Plan Cost	\$	\$
30 Total Cost of Insurance	\$ 200,388	\$ 240,252

SECTION VII: Medical Costs (continued)

31	Employee Insurance Contributions	\$ <u>57,267</u>	\$ <u>63,084</u>
32	Contributions as % of Total Insurance Cost	<u>28.6</u> %	<u>26.3</u> %

33 Identify any insurance changes that were included in this CNA.

SECTION VIII: Certification and Signature

34 The undersigned certifies that the foregoing figures are true:

Print Name: Richard B. Schwab

Position/Title: Township Administrator

Signature: /s/ Richard B. Schwab

Date: 10.26.2017

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: contracts@perc.state.nj.us

NJ Public Employment Relations Commission
Conciliation and Arbitration
PO Box 429
Trenton, NJ 08625
Phone: 609-292-9898

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